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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
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Application Number	09/845,457
Filing Date	April 30, 2001
First Named Inventor	Jonathan C Salas
Art Unit	2154
Examiner Name	Siddiqi, Mohammad A
Attorney Docket Number	MOON-P008

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 38396

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

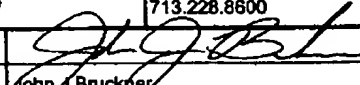
The reasons for this request are: Responsibility for this application has been transferred by the assignee.

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Robert P. Lord		
Address	Osha Lian LLP 1221 McKinney Street, Ste 2800		
City	Houston	State	TX
Country	USA		
Telephone	713.228.8600	Email	Lord@oshallang.com
Signature			
Name	John A. Bruckner	Registration No.	35,816
Date	August 22, 2006	Telephone No.	512-658-3768

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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